

(Print Name of lobbyist)

STATE OF NEW HAMPSHIRE 2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

RECEIVED

JUL 27 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

| I. Name of Lobbyist | t(s) <u>James P. Monahan ; Susan H. Pasc</u> | hell |
|---|--|--|
| II. Name of lobbyist | t's partnership, firm or corporation, if an | y: |
| The Dupont Group | | |
| (Name of partnership, firm | n or corporation) | |
| 114 N Main St. Suit | e 401 Concord, NH 03301 | |
| | (Town/City) (State) (Zip Code) | |
| (603)228-3322 | (603) 228-0713 | e-mail jmonahan@dupontgroup.com |
| (Telephone) | (Fax) | |
| | covers: (Choose one – file separate report s which are not attributable to any one cl | s for each client, OR you may file a separate report for reportable ient). |
| All reportable | transactions occurring in the month prior to | the reporting date relative to the following client: |
| Innocence Project | | |
| OR | (Full Name of Client as it appe | ars on the Lobbyist Registration Form) |
| All reportable tra | | byist's family), or the lobbying firm listed below which are unrelated |
| IV. Date of Report | April 25, 2018 | July 25, 2018 X |
| Reports cover | activity from date of registration to 3/31/ | |
| | October 31, 2018 activity from 7/1/18 to 9/30/18 | January 30, 2019 ☐ activity from 10/1/18 to 12/31/18 |
| | no fees received and no reportable trans: l, complete just this form and submit it to the | actions made since the last report. Secretary of State's Office, State House, Room 204, Concord, NH |
| | onal reports are attached: ved fees or made expenditures, you must fil | e Addendum A– Fees and Expenses |
| If you have paid Reimbursement | an honorarium or reimbursed expenses, you | must file Addendum B- Report of Honorariums or Expense |
| ☐ If you, your firm, | , or your family has made political contribut | tions, you must file Addendum C- Political Contributions. |
| Sworn Statement/A I have read RSA 15, best of my knowledg | | or affirm that the foregoing information is true and complete to the |
| a The | • | |
| - /- | | 7/22/2010 |
| (Signature of lobbyist) | | 7/25/2018 (Date) |
| James P. Monahan | | |



I. Name of Lobbyist(s)

STATE OF NEW HAMPSHIRE Lobbyist Fees and Expenses Addendum A

(RSA Chapter 15:6

| James P. Monahan ; Susan H. Paschell | |
|--|---|
| II. Name of lobbyist's partnership, firm or corporation, if any: | |
| The Dupont Group | · · · · · · · · · · · · · · · · · · · |
| (Name of partnership, firm or corporation) | |
| III. Name of Client Innocence Project Date 7/25/2018 | <u>, , , , , , , , , , , , , , , , , , , </u> |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above including fees for services such as public advocacy, government relations, or plegislation, and related legal work. The gross fee amount reported shall not be | public relations services including research, monitoring |
| a) Total of all fees received in this reporting period | a) \$ 10500 |
| b) Total of all fees received this calendar year, prior to this reporting period | b)\$10500 |
| (This should equal the total of all prior monthly reports for this calendar year) | |
| c) Total of all fees received to date (Add lines a and b) | c) \$21000 |
| d) Indicate the amount of any such fees that are due, but have not yet been paid | d) \$0 |
| V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reported to be filed for expenditures made relative to each client and if expenditures of each client and if expenditures of expenses of expenses: (a) the aggregate total of all expenses paid during the office expenses; (b) the aggregate total of all individual expenses where the expurchased during a business lunch where the cost was \$25.00 or less, purchase the person being lobbied, purchase of a ceremonial object given to a person be itemized statement of each individual expenditure made during this reporting covered by (a) (for example: purchase of a meal with value of greater than \$2 subject of lobbying with a value greater than \$25, but not greater than \$50, refor honorariums, expense reimbursement, or political contributions will be rejon Addendum A. | enditures are made by the lobbyist(s)/firm that are rm. Expenses are to be reported in one of three reporting period for salaries, benefits, support staff, and expenditure was of \$25.00 or less (for example: meals e of a pen with a value of less than \$10 that is given to eing lobbied with a value of \$25.00 or less); and (c) an period of greater than \$25.00 for any purpose not 5, purchase of a ceremonial object to be given to the staurant expenses for a legislative reception). Expenses |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying. | a) \$ |

| b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less. | b) \$ |
|--|--|
| c) Total of all itemized expenditures reported in detail in section VI. | c) \$ |
| d) Total expenses for this reporting period (Add lines a, b and c) | d) \$ |
| e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report) | e) \$ |
| f) Total of all expenses year to date | f) \$ |
| VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from I whom paid or to whom charged. | obbying fees dúring this reporting period, including b |
| Paid to: Amount: | \$ |
| | \$ |
| | \$ |
| | \$ |
| | \$ |
| · · | \$ |
| Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm that the best of my knowledge and belief. | |
| J. The | |
| 7/25/2 | • |
| (Signature of lobbyist) (Date) | |
| James P. Monahan (Print Name of lobbyist) | |

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

| Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for: |
|---|
| Name of Lobbying partnership, firm, or corporation: The Dupont Group |
| Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any particular |
| client): Innocence Project |
| Date of Report (check one): |
| April 25, 2018 |
| following Addendums submitted with that Statement (insert the number of Addendum forms being submitted): |
| <u>I</u> Addendum A(s). |
| 0 Addendum B(s). |
| <u>O</u> Addendum C(s). |
| I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief. |
| pusauH. Paschell |
| (Signature of lobbyist) 7/25/2018 (Date) |
| Susan H. Paschell |
| (Print Name of lobbyist) |